Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL001117	A. BUILDING: 01 CONSTRUCTION SECTION B. WING MAY 04 2015	03/25/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DEE & G ENRICHMENT CENTER	2822 S MEBANE STREET RECEIVED BURLINGTON, NC 27215

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments Report by Greg Williams DHSR Construction Section conducted a Biennial Survey on March 25. 2015 from 11:00 AM to 12:30 PM at the above referenced facility. DHSR records indicate the home was first licensed on December 08, 2006 as a Family Care Home for six (6) ambulatory Residents (able to evacuate and respond without any physical or verbal assistance during a fire or other emergency). Based on this we are requiring the home to be in compliance with the following: the 2005 Rules 10A NCAC 13G for Family Care Homes and the 2002 North Carolina State Building Code - Section 421.2 - Residential Care Homes. At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:	C 000	4/27/15 (1) Dee & G Enrichment will assure that there are two bathrooms to accomodate 6 residents There ISN't a restroom for staff only. Staff will use one of the two bath there that are for the si residents that live here There are also hand grips on both toilets for residents to hold o For stability And suppor	
C 135	Bathroom-Hand Grips SECTION .0300 - THE BUILDING 10A NCAC 13G .0309 BATHROOM (e) Hand grips shall be installed at all commodes, tubs and showers used by the residents. This Rule is not met as evidenced by: 1. In Residents Bathroom #1 there were no hand grips at the toilet as required by the above referenced rule. Provide hand grips at the toilet and forward supporting documentation to our office when corrected. You indicated at the time of survey that Residents Bathroom #1 was for Staff use only. Please note that Licensure rules dictate that for five or more residents the facility, has to provide two full	C 135	In order to assure Comf In this area or other areas The Administrator u monitor bi monthly to as: there are no re.occurar This action has been corrected as of 4/27/ Dee & G will forwa pictures of corrected Areas For viewing Also.	

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE
Cherry Crump Administrator

STATE FORM 6899 J76J21 If continuation sheet 1

PRINTED: 04/16/201
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C 135	Continued From page 1 bathrooms; you are currently licensed for Six Residents. If the facility would like to keep Bathroom #1 strictly for staff use then one of the following will need to be implemented; you would either need to amend the facilities license to serve a maximum of five residents only or provide another full bathroom for resident use. Please advise our office as to what the facility would like to do to remedy this deficiency. 2.) it was also observed that the hand grip placed on the tub is a suction device, these are not accepted as they can slip an cause harm to the user.Provide something that is mechanically fastened or anchored that will not create a potential hazard to the resident when in use and forward supporting documentation to our office when corrected.	C 135	(135) Dee & G assures that Hand grips with suction device have been replaced with a sturdy anchored hand grip to prevent slips or falls The Administrator will Monitor bi Monthly to assure the compliance. This deficiency has been completed on 4/27/15.	
C 174	Building Equipment Maintained Safe, Operating SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition. (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by: 1. On the front entry ramp there is a handrail on the left side that has come loose. Reattach the handrail to prevent potential falls and provide documentation to our office when corrected. 2. The outside night light located at the front of the facility by the ramp has been broken and was	C 174	Dee & G will assure that The handrail at the left side has been nailed down, In order to prevent Falls etc. The Administrator will monitor bi monthly to prevent any reoccurance This deficience was Corrected on 4/27/15	

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C 174	Continued From page 2 coming apart. Have the lamp repaired or replaced and provide documentation to our office when corrected. 3. The flooring in the kitchen was coming up around the base of the cabinets. Have a qualified techinician make the necessary repairs to secure the flooring to the subfloor and provide documentation to our office when corrected. 4. The GFCI receptacle located on the left side of the stove was loose from the outlet box. Have a qualified techinician secure the GFCI receptacle to the outlet box and provide documentation to our office when corrected. 5. In Resident Bathroom #2 there was a section of the backsplash where the formica has become seperated . Have the formica repaired/replaced to the backsplash and provide documentation to our office when corrected. 6. In Residents Bathroom #2 there were two hanging lights over the sink that did not have globes. Install globes on the two hanging lights and provide documentation to our office when corrected. 7. In Residents Bathroom #2 it was noted that there was mold on the caulking around the inside bottom of the shower. Have the old caulking removed, thoroughly cleaned and recaulked , once completed provide documentation to our office.. 8. On the right side of the facility the exterior siding was covered with mold. Have the exterior siding pressure washed and provide documentation to our office when corrected.	C 174	(2) Dee "G Enrichment Ct have repaired the lamp outside by replacing It with a new cover etc. This will be monitre bi monthly by Administa In order to remain in Compliance and assure t problem doesn't reoccur. (3) Dee "G has repaired the base of the cabin by Installing a metal strip to assure that th tile would not come up From the Flooring, Also (4) GFCI receptacle has been tightened to the outlet box. As wel (5) as Backsplash has been glued Into place like It Needed. To assure that there is no seperation.	

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C 174	Continued From page 3 9. At the back of the facility there was a section of the siding under the family room windows where the siding appears to be damaged. Have the siding repaired or replaced and provide documentation to our office when corrected.	C 174	The Sidingunder the family room window has been stapled to assure that It doesn Fall off. Dee & G will assure th all deficients have been corrected. The Administrator wil monitor bi monthly To assure that this doesn't reoccur agair 41 L	